
Pablo Gómez’s *The Experiential Caribbean: Creating Knowledge and Healing in the Early Modern Atlantic* challenges long-familiar narratives about the histories of early modern science and medicine in the New World. Over the course of a brief introduction and seven chapters, Gómez elucidates how a set of African or African-descended “Mohanes,” or “black ritual practitioners,” and their patients (be they black, white, or Amerindian) “led an epistemological revolution in Caribbean intellectual spaces that existed both in parallel and in conversation with European-sponsored projects that explored the natural world” (p. 3). Central to understanding this epistemological revolution is the reframing of Caribbean spaces and places. As such, Gómez’s book “departs from an ideation of the Caribbean as a space that, even if containing sizeable populations of European (mostly Iberian) origins, was first held together and stitched out of fragmentation by ... people of African descent of the sixteenth and seventeenth centuries” (p. 9). Gómez is particularly attuned to how “people of African descent fashioned the Caribbean,” and his first three chapters focus on recreating the spaces, places, and patterns of movement that characterized the black Caribbean (p. 8). The remaining four chapters detail first the practices and, in the end, the epistemological regime of the black Caribbean.

His argument begins with a careful, demographic reconstruction of the Caribbean basin, paying particular attention to the influence of African and African-descended peoples. He emphasizes the varying degrees of mobility attained by non-Europeans, particularly by tracing a representative set of black ritual practitioners, both free and enslaved, who circulated in a competitive healthcare marketplace. In a departure from much recent work on the period, Gómez presents an early modern Caribbean that is not centered around the plantation complex. Instead, Cartagena de Indias and other capitals of the black Caribbean, populated by people from diverse parts of Africa (both newly arrived as well as African-descended) are, in Gómez’s framing, “unique centers of trade, profanation, and human encounters defined by fluidity and, ever increasingly, by their blackness” (pp. 26–27). A failure of imperial authority to neatly impose its will on the practical realities of life in urban Caribbean spaces emerges as a secondary theme throughout Gómez’s book. Canonical spaces of healing, particularly hospitals, convents, and public plazas, “did not reproduce European or Native American hierarchies or physical distributions, despite being planned physically and legally to replicate the imagined reaches and designs of European authorities” (p. 68). As such, bodily experience in the
early modern Caribbean was not controlled by papal bulls or by maps drawn in Rome or Seville. Instead it was, in Gómez’s terms, “a place of polyglot, black urbanity marked by its multioriginated Caribbeanness” (p. 33). Gómez sketches the vibrant and volatile culture of healing which emerges out of this “multioriginated Caribbeanness,” tracing its spread via various Mohanes and their “elastic, unbounded migrations” within and between Caribbean spaces: from urban centres like Cartagena to the islands of Cuba, Jamaica, and Hispaniola, as well as the mountainous hinterlands of the Kingdom of New Granada (p. 17).

This mobility produces what Gómez labels a “creative praxis” distinct from the emergent epistemological regime of European empiricism (p. 81). The cultural meaning and therefore healing capacity of a given diagnosis, medicament, healing ritual, or course of treatment evolved as black ritual practitioners moved through social and geographical spaces around the Caribbean. What grounded the healing knowledge traced by Gómez was a focus on the experiential. “Caribbean practices did not reference a specific system of beliefs,” Gómez writes, “but rather embodied a new common ground among many traditions in which the experiential became essential for the creation of novel ideas about how power over bodies could be wielded” (p. 80). As examples of this experiential practice, Gómez dedicates a chapter each to the distinctly Caribbean form and function of the pharmacopeia and the wonder tale. Gómez describes what he calls “social pharmacopeia,” or how “substances with bodily effect,” work and are conceived of in the Caribbean (p. 118). Such substances were animated by the practitioner in important ways. Of one powerful black ritual practitioner, Francisco Mandinga, Gómez writes: “Francisco’s mastery in preparing his substances and his evident success in the medical marketplace of the early modern Caribbean had less to do with anticipating those herbs’ effects than with cleverly reading and influencing the socio-experiential healing contexts in which he administered them” (p. 133). Such administration of healing materials also relied on the affective power of wonders. Like many healthcare practitioners in the early modern period, Mandinga, and other Mohanes, used “wonder-making procedures to advance the power of their healing methods” (p. 165). However, unlike their European counterparts, Mohanes were “less interested in reinforcing particular paradigms and dogmas ..., and more interested in gaining power from the viscerally felt nature of the astonishing” (p. 165). As such an adaptation of wonder tales demonstrates, the epistemological authority wielded by Mohanes emerged from “‘bodily experience’ that did not necessitate explanations about final causes” (p. 176). And, tellingly, this emphasis on the experiential arose concomitant to, not as a result of, the influence of European empiricism. For, as Gómez points out, “at the same time that groups traditionally associated with New Science, including the Royal Society and the Académie